

**Submission
No 194**

**INQUIRY INTO VETERINARY WORKFORCE SHORTAGE
IN NEW SOUTH WALES**

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Submission to NSW Legislative Council committee's inquiry into the Veterinary Workforce Shortage.

1, My name is Jeffrey Titmarsh, B.V.Sc, N . I own (now half of) Raymond Terrace Veterinary Clinic, Which I established alone, in November 1976. This is my 47th year in my own practice, and my 51st year out of Queensland University. I am making this submission as an individual, and as an infrastructure provider to my community, after long exposure to the good and bad points of the profession.

A. I can speak only for my own practice, but it is very difficult to recruit Veterinarians to Raymond Terrace Veterinary Clinic. I work as a half a Full time equivalent, but manage the practice behind the scenes, as well. The lady vet who owns the other half of the practice is in her 11th year at the practice, and in her 6th year as a partner. (a Queensland graduate). There is a lady vet who works half a full time equivalent, who has been with me for over 30 years, and we have 2 Wagga Graduates in their 3rd year out of Uni, working full time. One of the Wagga graduates was known to me as a kid, and spent time at the clinic, from high school and through university. The other one was her friend at Uni, and was recruited on that basis. Advertising is largely a waste of time, with special mention of the fact that we try to provide as best possible, (with a small number of people) afterhours service to **our** clients, although we may refer those who are not our clients to Newcastle NAREC facility. It is extraordinarily difficult to find graduates willing to provide afterhours service, on a roster basis, (one night on call a week, and one weekend in 4 or 5 on call). They simply do not apply for the job. When we took on the second Wagga Graduate, we removed our Job advertisement, after months of no enquiry. Those neighboring practices who do have success recruiting, are able to source female graduates who work part time, often family friendly hours, and provide no afterhours service.

We have 8 full and part time nurses.

The practice after nearly 50 years of servicing all animals, now provides small animal services, with the occasional sheep, goat, calf, alpaca, or other service (mostly by me). The younger vets are not interested in providing larger animal services. At nearly 73, I gave myself a leave pass on horses and cattle a couple of years ago.

It takes so long per outside large animal call, that with our overheads, it becomes uneconomic. Especially when you are so busy that you cannot fit it in.

- B. When I entered the Queensland Vet School in 1967, entry was on the basis of matriculation only, all applicants being accepted. There were 120 in my first year class. Of those, 32 graduated with me in 1972, (out of a graduating class of 52), and a few others managed to graduate over subsequent years. It did have the benefit of selecting for the highly motivated. Almost all of those who graduated with me, stayed in the profession for a lifetime, working in some capacity. Two suicided early. When you apply different selection criteria, then you get different outcomes. I would stand little chance of selection under today's regimen. In particular, the selection especially for Sydney, is heavily focused on the highest ATAR scores, The outcome in that case is that the male applicants with the highest ATAR scores, look at the opportunities and rewards available and the lifetime remuneration likely in the Veterinary profession, and choose another profession. This means that the pool of high ATAR achievers available for selection, is heavily female. Female veterinarians are very good veterinarians, but they generally have a very different set of lifetime expectations. It is my belief that many of them after maybe 5 years in the profession, find that family life and working in practice become very difficult. Many withdraw from practice. Some withdraw from the profession. Working arrangements can be difficult to amend to suit a mother with young, school age children, in the relentless environment of practice. My personal bugbear is the idea that gender equity is defined as 95% female. There are many male aspirants out there who would make excellent vets, who are academically competent, but who, coming from a non-urban background, do not achieve that extremely elevated ATAR score. It is simply fantasy to believe that a female from the best schools, often private schools, In Sydney, where quality of education is very high, and academic support is "on tap", is going to be more competent than a male student from a non-metropolitan, or overtly rural, rural background in which the public schools available are simply NOT of the same standard.

Especially when the rural male is familiar with, and integrated into the lifestyle actually lived on horse and cattle properties in rural areas.

At Wagga, there is a degree of selection towards a rural background, but more than 5 of those graduating with my 2 wagga graduates ended up working in the area around Newcastle. It was not that big a class.

c. Sadly, we are very familiar with anxiety causing problems at work. Not everyone is capable of dealing with the public. It can have a devastating impact on the individual veterinarian, as well as the work of the practice. In a working day where a vet may have to deal with more than 20 consultations, some of which are easy, many of which are not, in a field where the vet may have to present a compelling argument of some sort for their idea of the best outcome for the animal, which may include euthanasia, and has to fit suggestions into the economic capability of the owner, it can be very difficult to keep calm, placid, and settled, with a good moral compass. And then go on to do a number of surgeries which may be easy, or may be bloody awful.

I have described my impression of practice to a young vet as going to work, getting trampled all day by a herd of buffalo, and then going home. To try and reconcile the day's activities with your humanity. And be unable to have an alcoholic drink, on the chance that you may be called out, and have to drive.

It can be worse afterhours, where the individual vet, unsupported and often alone, can have to deal with the worst thing that can be imagined. As an example, the dog with a hole on its chest wall from a dog fight, or from a kangaroo claw ripping the intercostal muscles; and through the hole in the chest wall, you are watching the heart beating. Or a rotten caesarean, with a burst, dead, uterus, and rotten pups in the abdomen. Or worse (think lots of dead bowel). Yes, you can call in a nurse to help, and if you work in a good practice, you can call in another vet to assist, but the initial impact is still on the vet.

Stressful situations define the work done by the vet. Some cope better with it, some do not cope with it at all. This profession kills an unfortunate number of veterinarians.

In our practice, we try to avoid our vets getting held over the edge of the pit. We support each other, share opinions on anything which is even a little bit unusual, and if something is unclear, then we get the animal in for the day, and every vet working that day gets a chance to examine it,

and discuss it. It looks a bit odd, but it works to reduce the level of expectation on every vet, and the requirement to be a 'THERAPUTIC THUNDERBOLT'. It also helps to work in a well equipped practice, with good equipment, and to be encouraged to pursue your personal interests. Veterinary work is not about making a profit for the corporate accountants, it is about fulfilling yourself, and letting the good bits far outweigh the bad bits. Which builds resilience, and tolerance for the really bad bits. And NEVER FEELING LEFT ALONE, unsupported. One of us is always available to assist if required.

"Burn Out", happens when the work goes on and on, with no relief. Working with regular, planned time off, which can be done in practices with at least 3 vets, relieves the pressure. Lack of available employable vets, does not. Lack of veterinary graduates who will work outside of Sydney, who will leave their circle of friends, and who will move to an unfamiliar, non-metropolitan area now that they have graduated, and work on animals they have not grown up with, in a rural culture they have only brushed against during prac work, and are not comfortable with, defines the problem.

Listening to metropolitan female graduates complaining about the work offered them, as bottom of the totem pole, when senior vets take all the interesting jobs/work; and making a diagnosis, only to be required to say that while she could do it, she has never actually done such a procedure, and there is a specialist center down the road, it is easy to understand why the vet involved was leaving the practice to work as a drug company vet. In smaller, non-metropolitan practices, where you are expected to have a go at anything, there is far more opportunity, and professional growth.

Even worse is the situation where the employed vet was required to meet a targeted financial number for each consultation, which overtly required degrees of overservicing, and unnecessary pathology (in house of course), which 'PISSSED OFF " the employed vets, causing them to leave the practice. From the frying pan into the fire. Or the state laboratory services.

d. Veterinary nurses are the backbone which holds the profession upright. They cheer us up when we are feeling picked on, they look after our patients so well, in a way in which we cannot, as we MUST retain a degree of detachment to protect ourselves, from the ones which fare

really badly; and they feel it more, when things do not go well. Our nurses support each other really well. BUT, it is not them who feels personally responsible for the outcomes, (or legally responsible). The individual vet has to bear that cross. Not the nurse.

On a slightly different aspect, I do not support the development of a “nurse practitioner” aspect to our profession. There is no way that the moral responsibility for outcomes can be pushed onto a nurse who does not have the depth or breadth of education to sustain that impost. The discussion just had in “c”, applies exponentially to someone only partially trained. Mental health safety can come only with proper education and backup. Not half training someone and throwing them in the deep end.

e. The closest I came to this matter was a Spanish lady vet we flew out to have a look at for a couple of weeks. She had failed the English test of the vet Boards, but we wanted a look at her. With encouragement and supervision, she would have worked out fine, but she was just not experienced. She at least had a week at the great barrier reef on us, and subsequently gained employment in Spain, so re-sitting the vet boards was moot. No other opinion. On a trip to Sri Lanka, I was encouraged to take on our tour guides cousin. As his specialty was elephants, that did not seem a likely practice developer.

f. As a practice which does try to provide a limited afterhours service to OUR clients, it is difficult. Other practices’ clients we have no moral obligation to. We may see them, or we may refer them to NAREC in Newcastle. We manage this by me doing 2 weeknights, The other partner doing 2 weeknights, and one of the 2 younger vets doing 1 weeknight. Two vets in the practice are not able to do afterhours. It really does affect them adversely. They cannot cope with the uncertainty and pressure of being on call. Working with a bunch of people around you, is a world of difference to working alone.

Weekends, I do 1 and split one, as does the partner. The young vet does one in 4, approximately.

It may be quiet, or frantically busy. We do a lot of caesareans for dog breeders, which ups the workload. The employed vet nets half of

the professional fees, for all such afterhours service. It is sometimes a significant addition to the wage.

It is always true that the afterhours is on top of the full day's work. We do not seek it.

Limited afterhours service means whatever we feel we can do within our limited staffing. Caesareans while major, are very straight forward, and we do a lot of them, mostly for our breeder clientele. Similarly some but not all enterotomies. Gastric torsions are maybe, or maybe not, and so a referral to NAREC. What we decline are complex medical issues which will take hours of untangling, by a couple of vets, with extensive use of diagnostic equipment. If it can be supported until morning, when it can be looked at by several vets, then that is what we do.

The corporates do not provide afterhours service. It is not profitable. Which is why our clients prefer our limited service, as the afterhours services otherwise available match their increased level of cost to provide.

g. In truth, the legislative framework is not significantly on our mind. If we try to do the absolute best for our clients, and explain what we are doing, and bring them along with us; and not try to exploit, or overservice them, and treat them as equals, then we do not upset them. The legislation is only significant when we are asked to do something expressly forbidden, which we immediately recognize; or when something goes wrong. Which, try as we might, it does occasionally. Then, we are an open book. We try not to antagonize our clients, and try not to leave anyone openly angry behind us. The law is the refuge of a vindictive client. We try not to upset them so much.

h. Let's see. You have a University system which effectively takes few aspirants from the rural / regional areas, because they cannot get the high ATAR scores achievable in the cities due to the realities of education in the dispersed rural communities.

You have bowed to the University bureaucrats who by making the already long degree a post graduate degree, which maximizes the financial return to the universities, but places a large impost on individual students, from rural areas where there is simply less “old money”, and less affluence generally.

This guarantees that few rural students can afford to sit it out in a university course lasting for undergraduate course 3 years, plus postgraduate veterinary course up to 5 ½ years, on students income. Especially in Sydney.

This means that the student body has few who actually grew up with cow shit between their toes. And why the majority who do graduate have little desire to get cow shit anywhere near their toes.

Rural life is enjoyable - for those who grew up there. It is less appealing for a sophisticated urbanite. A girl from a private college is not going to leave her social network in the city, for the joys of the bush. If you want someone to live in the bush, then educate someone who grew up there, not too far away from where they grew up.

The post graduate degree, or even Wagga, where you may get into the vet degree after one or two years of an undergraduate degree, is a trap. It really means that your kid from the bush, is looking at being 26 or 27 years old before completing their education. By that age, they are VERY likely to have met their life partner, who also has a vote. Kid from the bush, plus urban partner, who has a good job in the metropolitan area -----Likely to return to the bush???

I think not. This happened to one of my sons, doing a post grad Dentistry degree in Sydney, who is now married to a medical researcher. And living in Sydney. I was 22years old when I graduated, and moving was not an issue.

So I can state my opinion that the profession has been sunk by the selection policies of the universities. **And cannot be fixed without revisiting those selection policies.**

The sheer cost of the deferred fee liability has to be recognized. Except for the blessed few who can enter directly into – say –

Wagga, directly from matriculation, and thus only have a 5 ½ year deferred fees, the more likely scenario is an up to 8 ½ or 9 year fee liability. A glance at the award for Veterinary Surgeons tells an ugly story. It is possible that the fees thus incurred, may take a lifetime of work to pay off, on award wages. Especially if family commitments cause interruption of the working life. We pay well above the award. Probably many others do so, as well. Otherwise we would have no chance of overcoming the triple liabilities of quasi – rural location, afterhours work required, and minimal to no large animal work.

I contrast the experience of my time, when all could aspire, enter with matriculation, and try to achieve. This meant that kids from rural and semi-rural backgrounds, or interrupted education, such as myself, had the chance to shine, and lasted the course, while several of the doctor's daughters and sons, vanished without success. They entered the workforce unencumbered, and mostly stayed there. Especially those working in the country. When the universities are trying to pick winners, (while maximizing fee income), the current Upper House enquiry would suggest that they have failed. There is of course, no penalty for abject failure in the public sector.

I was associated with someone who applied this last year, and did the common to all universities (as I understand it) facetime interview over the net. I admit that the scenarios discussed during this interview gave me little sense that the Universities selection criteria as per this interview had much relevance to anything I have ever done in practice.

- i. Small private practices are private businesses. Strays, even injured or sick strays, are the liability and expense of Local Government. Small private businesses cannot wear the cost, and have no statutory protection from the owners of the strays. We do assist with wildlife (WINC) at cost of materials only. Emergency situations are dealt with on a case by case basis. But recognizing

that we have NO moral obligation. We have agency, and can do what works for us. It is our choice.

J. The animal welfare aspects, I cannot comment on. My business partner shows and breeds dog, and has a large dog show / breeder clientele, which our practice supports by providing breeding services, birthing and caesarean support, and general medical services, including afterhours services. We support OUR clients.

k. The reality of remote areas veterinary services, is that as the old vet retires, often late in life, he cannot sell his business, as no-one else aspires to live in that sort of area. The student body now, has no feel for that sort of lifestyle. Small veterinary practices usually help lower income clients, but the facts of life are that they are not a charity, and if you do enough work that does not meet the costs of providing it, then you go broke, and cannot support anyone. It costs a lot to provide quality veterinary services.

L. I re-iterate my statements about picking students who will work in rural and remote areas, and not saddling them with debts they will never pay off. There is no workable solution without acknowledging the failure of the Universities picking winners. But of course, they pick winners who are just like them.

M. We try locally to ensure that there are no access issues for OUR clients.

n. No comment

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